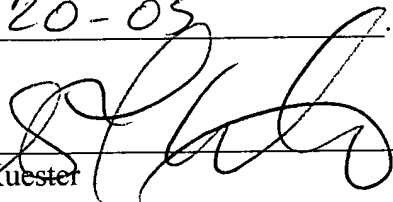


2614

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 7-20-05


Jeffrey R. Kuester

In Re Application of:

Wasilewski, Louise Mary

Serial No.: 09/801,958

Filed: March 8, 2001

Confirmation No.: 8732

Group Art Unit: 2614

Examiner: Manning, John

Docket No.: A-6979 (191930-1420)

For: **Consumer Controlled Selective Recording Device for Interactive Television**

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal Page
Response
Replacement Sheet - Fig. 1

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

AMENDMENT TRANSMITTAL LETTER (LARGE)Applicant(s): **Wasilewski, Louise Marie**

Docket No.

A-6979 (191930-1420)Serial No.
09/801,958Filing Date
March 8, 2001Examiner
Manning, JohnConfirmation No.
8732Group Art Unit
2614Invention: **Consumer Controlled Selective Recording Device for Interactive Television****Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450**

Transmitted herewith is a Response and Replacement Sheet (Fig. 1) in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	20 =	0	X \$50.00	\$0
INDEP. CLAIMS	3 -	3 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.



Jeffrey R. Kuester, Reg. No. 34,3677-20-05
Date